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TO: U.S. Patent and Trademark Office
Examiner: Archene A. Turner
Art Unit: 1775

DATE: February 18, 2004

FROM: Lawrence J. McClure

TIME:

TOTAL NO. OF PAGES, INCLUDING COVER: 8

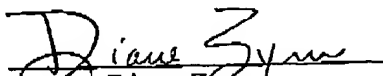
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MESSAGE:**RE: U.S. Patent Application Serial No.: 09/734,275; Our Ref. 81863.0007**

I hereby certify that the following documents:

- Amendment
- Amendment Transmittal Letter

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

February 18, 2004
Date of Deposit
Diane Zynn

TELECOPY/FAX NUMBER: 703-872-9310

CLIENT NUMBER: 81863.0007

ATTORNEY BILLING NUMBER: 1966

CONFIRMATION NUMBER: (571)272-1545 (please return fax to Diane Zynn)

FORM PTO-1083

Patent Application No. 09/734,275
Attorney Docket No. 81863.0007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Daisuke SHIBATA

Serial No: 09/734,275

Filed: December 11, 2000

For: CUTTING MEMBER

Mail Stop Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

Art Unit: 1775

Examiner: Archene A. Turner

I hereby certify that this correspondence
is being transmitted via facsimile to
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Alexandria, VA 22313-1450 on

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Signature

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Date

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	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	4	-	20	0	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	1	-	3	0	LG=\$84 SM=\$42	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140	\$ 0
Independent Claims: 1					TOTAL	\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. A copy of this sheet is enclosed.

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☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,

HOGAN & HARTSON L.L.P.

By:

Lawrence J. McClure

Registration No. 44,228

Attorney for Applicant(s)

Date: February 18, 2004

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Appl. No. 09/734,275
Amdt. Dated February 18, 2004
Reply to Office Action of November 18, 2003

Attorney Docket No. 81863.0007
Customer No.: 26021

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Daisuke SHIBATA
Serial No: 09/734,275
Confirmation No.: 3724
Filed: December 11, 2000
For: CUTTING MEMBER

Art Unit: 1775
Examiner: Archene A.
Turner

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AMENDMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated November 18, 2003, please consider the
following remarks:

Remarks/Arguments begin on page 2 of this paper.